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		Approved for use thms	PTO/SB/22 (12 ligh u7/31/2006, CMB 0851-0	1031
Linder the paperwork Reduction Act of 1895, no persons are majores	U.C. Peri ito necepond to a collecti	1 - J	LINDADIUENT OF CAMMUS	NUL Alla
PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Names (Option		*
FY 2005		MS1 0607US		
(Fees persuant in the Committeed Appropriations Act, 2005 (H.R. 4217).)		Filed 10/3 I/2000		
Application Number 09/704,196 For Melland and System for Controlized Natwork Usag	e Trackino	11.00		
Art Unit 2155		Examiner LIANG C	HE A WANG	
This is a request under the provisions of 37 CFR 1.136(2 application.	) to esteral the per	iod for filing a roply in th	e apove identified	
The requested extension and feer are as follows (check to	me pandd deelred	and enter the appropria	te fee balow):	
	Fee	Small Entity Fee		•
One month (37 CFR 1.17(a)(1))	\$120	\$60	\$	•
Two months (37 CFR 1.17(a)(2))	<b>\$45</b> 0	\$225	\$450.00	
Three months (37 CFR 1.17(a)(3))	\$1020	\$510	<u> </u>	-
Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$	-
Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$	
Applicant claims small entity status. See 37 CFR 1.3	27.			
A check in the amount of the fee is enclosed.				
Payment by credit card. Form PTO-2038 is att	ached.			
The Director has already been authorized to charge fees in this application to a Deposit Account.				
The Director is hereby authorized to charge at Deposit Account Number 12-0769	w fees which ma		lit any overpayment,	to t.
WARNING: Information on this form may become pub Provide caudit card information and authorization on	ille. Credit card info PTQ-2038.	rmation should not be inc	oluded on this form.	
I am the   ] applicant/inventor.		nem n 24		RECEIVED
assignee of record of the entire Statement under 37 CFR 3.7	interest. Sec 37 3(b) is enclosed	(Form PTQ/\$B/98).		OIPE/IAP
attorney or agent of record. Hos	jistration Number	·		SEP 0 1 2005
ettomey of actin under 3/ CFH Registraturation index	t 1.34. 97 CFR 1.94	37954		
Ilunh Allerger		4.3	11-05	
Signature ()		Date		
David S. Thompson		(509) 324-9256		
typed or printed name		Tolophone Number		
NOTE: Signatures of all the inventors or excignate of record of the end eigenstate is required, see halow	प्त क्षाप्रकारक क्षेत्रकात का प्रमुख्या का प्रमुख्य का	sentative(a) are required. Eubn	nit multiple forms it more than	9 <b>6</b> 71 <b>6</b>
	submitted.		direction in his the second has the	
This sufficient of Information is required by 27 CFR 1,138(a). The inform USFTO to proceed an explication. Confidentially is governed by 35 U.S. complete, including gathering, preparing, and submitting the completed.	6 C. 127 RDD 37 CPK 1.1 Indication form to the U.	in and 1,14. This conduction is SPTO. Time will was adopted in	ng upon the individual case.	λny
complete, including gardening, impraining, and statistically in the comments on the amount of time you require to complete this form and/office. U.S. Potent and Trademark Office. U.S. Department of Commerce, P.O. FORMS TO THIS ACCRESS. SEND TO Formment and Fatterias.	n suggestions for reduca Box 1450. Ajexandris⊾ \	(A 22313-1460. DO NOT SEN	10 DM Chies and there of Alle	: <del>6</del> f,

it you neen accusumes in completing the fund, well 1-000-PTO-2122 and colort aprion 2.

PAGE 3/23 \* RCVD AT 8/31/2005 2:52:20 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-6/27 \* DNIS:2738300 \* CSID:15093238979 \* DURATION (mm-ss):05-02